MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. **10/⬤9789**

APPLICANT(S)

FILING DATE

(70⬤) 9⬤5-⬤421

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT				AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51				/		
2								52				/		
3								53				/		
4								54				/		
5								55				/		
6								56				/		
7								57				/		
8								58				/		
9								59				/		
10								60				/		
11								61				/		
12								62				/		
13								63				/		
14								64				/		
15								65				/		
16								66				/		
17								67				/		
18								68				/		
19								69				/		
20								70				/		
21								71				/		
22								72				/		
23								73				/		
24								74				/		
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27								77						
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32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38			/					88						
39				/				89						
40				/				90						
41				/				91						
42				/				92						
43				/				93						
44				/				94						
45				/				95						
46				/				96						
47				/				97						
48				/				98						
49				/				99						
50				/				100						
TOTAL IND.		⬇ 3	⬇		⬇			TOTAL IND.		⬇	⬇		⬇	
TOTAL DEP.		⬅ 33	⬅		⬅			TOTAL DEP.		⬅	⬅		⬅	
TOTAL CLAIMS		36						TOTAL CLAIMS						

PTO-1360 (REV. 11-01)